## DGGETHET DEICH

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

| My residence, pos  | l inventor, I hereby do<br>t office address and c<br>original, first and sol                                | itizenship are a  |   |  |   | riginal, first and  | ioint inventor (if  |
|--|---|---|---|--|---|---|---|
| plural names are lis   | sted below) of the sub<br>VES FOR PAINTS  | ect matter which  | ch is claimed                                   |  |   |   |   |
|  | <u> </u>  | 2 PAND INAN   |   | cification of  | which:                                    | <del></del>   | <u>.</u>  |
| (check one)  | ☑ is attached l   | □ was file  |   |  |   | as  |   |
| ,  | ••  | •   |   | tion Serial No   | 0.  |   | and   |
|  |   |   |   | ended on   |   |   |   |
|  |   |   |   |  |   | (if applicable)   |   |
| amended by any a   | I have reviewed and<br>mendment referred to<br>duty to disclose info  | o above.  |   |  | •   |   |   |
|  | reign priority benefits   |   |   |  |   |   |   |
| inventor's certifica<br>United States, list                    | ate, or §365(a) of any<br>ed below and have al<br>ication having a filing                                   | PCT internation of PCT internations identified be           | onal application                                | on which des<br>gn applicatio  | signated at<br>n for paten                | least one count or inventor's                             | try other than the  |
| Prior For  | eign Application(s)   |   |   |  | Priorit                                   | y Claimed   | •   |
|  | 255720  | Japan   | 25/   | 08/2000  | 11.011                                    |   |   |
| (NUMBER  |   | (COUNTRY)   | (FILED  |  | YES                                       |   |   |
|  |   |   |   |  | _ ¤                                       | ⊡   |   |
| (NUMBER<br>I hereby claim the                                  | )<br>e benefit under 35 U.  | (COUNTRY)<br>S.C. §119(e) of                                | (FILED any United                               |  | YES<br>onal applica                       |   | elow.   |
| (APPLICA   | TION NUMBER)  | (FILING I   | DATE)   |  | ı   |   |   |
| (APPLICA   | TION NUMBER)  | (FILING I   | DATE)   |  |   |   | •.  |
| application design<br>is not disclosed in<br>35 U.S.C. §112, I | e benefit under 35 Unating the United State the prior United State acknowledge the dutable between the fill | es, listed below a<br>stes or PCT into<br>y to disclose int | and, insofar a<br>ernational ap<br>formation wh | s the subject in the plication in the city is material in the city | matter of ea<br>he manner<br>al to patent | ach of the claims<br>provided by the<br>ability as define | s of this application<br>to first paragraph of<br>the d in 37 CFR §1.56 |
| (APPLICA   | TION SERIAL NO.)  | (FILIN  | G DATE)   |  | (STATUS)                                  |   | •   |
| •  | ·   |   |   | *  |   |   | •   |
| (APPLICA   | TION SERIAL NO.)  | (FILIN  | IG DATE)  | <del></del> ;  | (STATUS)                                  | <del></del>   |   |
| POWER OF AT  | TORNEY: As a nam  | ed inventor. I  | hereby appoi                                    | nt the follow  | ing attorne                               | evs and/or agen   | ts to prosecute this  |
|  | ransact all business in   |   |   |  |   |   | or the brooms are   |
| Leonard W. Sh  |   | No. 19,636  |   | Alan Holler  |   | Reg. No. 29,2   | .66   |
| Edwin A. Shall   |   | No. 19,967  | ,   | Karl Hoback  |   | Reg. No. 23,0   |   |
| Richard A. Ste   |   | No. 26,588  | •   | Robert L. H  |   | Reg. No. 35,5   |   |
| Perry Carvellas  |   | No. 19,637  |   |  |   | 24.0. 1.01.0010   |   |
| SEND CORRES  | PONDENCE TO:  |   |   | DIRECT TE  | ELEPHONE                                  | E CALLS TO:   | ·   |
|  |   |   |   |  |   |   |   |

SHERMAN & SHALLOWAY 413 North Washington Street Alexandria, Virginia 22314

(703) 549-2282

DOSESTEL DELOCI

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or document or any patent issuing thereon.

| Full name of sole or                                 | Takao  |                                   | UEHARA               |  |  |  |  |  |
|--|--|-----------------------------------|----------------------|--|--|--|--|--|
| first inventor                                       | GIVEN NAME                                   | MIDDLE NAME                       | FAMILY NAME          |  |  |  |  |  |
| Inventor's signature                                 | Takao  | <u>-</u>                          | Vehara               |  |  |  |  |  |
| Date of signature                                    |  | July 31, 2001                     | ·                    |  |  |  |  |  |
| Residence  | Kawasaki-shi                                 | Kanagawa-ken<br>STATE OR PROVINCE | Japan<br>COUNTRY     |  |  |  |  |  |
| Citizenship  |  | Japan                             |                      |  |  |  |  |  |
| Post Office Address                                  | 4-16-25, Nishiikuta, Tama-ku, Kawasaki-shi   |                                   |                      |  |  |  |  |  |
| (insert complete mailing address, including country) | Kanagawa-ken, Japan                          |                                   |                      |  |  |  |  |  |
| Full name of   | Jun  |                                   | YAMAZAKI             |  |  |  |  |  |
| second inventor                                      | GIVEN NAME                                   | MIDDLE NAME                       | FAMILY NAME          |  |  |  |  |  |
| Inventor's signature                                 | Jun  |                                   | Yamazaki             |  |  |  |  |  |
| Date of signature                                    | July 31, 2001                                |                                   |                      |  |  |  |  |  |
| Residence  | Koshigaya-shi                                | Saitama-ken                       | <u>Japan</u>         |  |  |  |  |  |
|  | CITY   | STATE OR PROVINCE                 | COUNTRY              |  |  |  |  |  |
| Citizenship  | ·  | Japan                             |                      |  |  |  |  |  |
| Post Office Address                                  | Charmant-Kosh                                | igaya A-102, 5-7,                 | Higashiyanagida-cho. |  |  |  |  |  |
| (Insert complete mailing address, including country) | Koshigaya-shi, Saitama-ken, Japan            |                                   |                      |  |  |  |  |  |
| Full name of   | Kiyomasa                                     | , ·                               | OHIRA                |  |  |  |  |  |
| third inventor                                       | GIVEN NAME                                   | MIDDLE NAME                       | FAMILY NAME          |  |  |  |  |  |
| Inventor's signature                                 | Kiyomasa                                     |                                   | Ohira                |  |  |  |  |  |
| Date of signature                                    | July 31, 2001                                |                                   |                      |  |  |  |  |  |
| Residence  | Soka-shi                                     | Saitama-ken                       | Japan                |  |  |  |  |  |
| Residence  | CITY   | STATE OR PROVINCE                 | COUNTRY              |  |  |  |  |  |
| Citizenship  |  | Japan                             |                      |  |  |  |  |  |
| Post Office Address                                  | AI-Casa 203, 32-8, Nakane 2-chome, Soka-shi. |                                   |                      |  |  |  |  |  |
| (insert complete mailing address, including country) | Saitama-ken, Japan                           |                                   |                      |  |  |  |  |  |
|  | · ·  |                                   |                      |  |  |  |  |  |

ADDITIONAL INVENTORS ARE BEING NAMED ON SEPARATELY NUMBERED SHEETS ATTACHED HERETO

| Full name of   | Shigehiro    | ·                   | KAWAHITO         |
|--|--------------|---------------------|------------------|
| inventor   | GIVEN NAME   | MIDDLE NAME         | FAMILY NAME      |
| Inventor's signature   | Shigehin     | Λο                  | Kawahito         |
| Date of signature  | -            | July 31, 2001       | 1                |
| Residence  | Soka-shi     | Saitama-ken         | Japan            |
|  | CITY         | STATE OR PROVINCE   | COUNTRY          |
| Citizenship  |              | Japan               |                  |
| Post Office Address<br>(insert complete mailing<br>address, including country) | 445-7, Kinme | i-cho, Soka-shi, Sa | itama-ken, Japan |
| Full name of   | ·.           |                     |                  |
| inventor   | GIVEN NAME   | MIDDLE NAME         | FAMILY NAME      |
| Inventor's signature   |              | 7                   | ·<br>·           |
| Date of signature  |              |                     |                  |
| Residence  |              |                     |                  |
|  | CITY         | STATE OR PROVINCE   | COUNTRY          |
| Citizenship  |              |                     |                  |
| Post Office Address  |              | ·                   | ·                |
| insert complete mailing ddress, including country)                             |              | ·                   |                  |
| Full name of   |              |                     |                  |
| nventor  | GIVEN NAME   | MIDDLE NAME         | FAMILY NAME      |
| nventor's signature  |              |                     |                  |
| Date of signature  | -            |                     | ·                |
| Residence  |              |                     |                  |
|  | CITY         | STATE OR PROVINCE   | COUNTRY          |
| Ditizenship  |              |                     |                  |
| Post Office Address insert complete mailing                                    |              |                     |                  |